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**SUBSTITUTE DECLARATION AND POWER OF ATTORNEY**

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As the below named inventor, I hereby declare that:

**TYPE OF DECLARATION**

This declaration is of the following type: (CHECK ONE APPLICABLE ITEM BELOW)

- ☒ original
- ☐ design
- ☐ supplemental

NOTE: IF THE DECLARATION IS FOR AN INTERNATIONAL APPLICATION BEING FILED AS A DIVISIONAL, CONTINUATION OR CONTINUATION-IN-PART APPLICATION, DO NOT CHECK NEXT ITEM; CHECK APPROPRIATE ONE OF LAST THREE ITEMS.

- ☐ national stage of PCT
- ☐ divisional
- ☐ continuation
- ☒ continuation-in-part (C-I-P)

**INVENTORSHIP IDENTIFICATION**

My residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**TITLE OF INVENTION**

**Interactive Medication Dispensing Machine**

## SPECIFICATION IDENTIFICATION

the specification of which:

(a) ☐ is attached hereto.

(b) ☒ was filed on October 8, 1998 as Serial No. 09/168,783.

NOTE: AMENDMENTS FILED AFTER THE ORIGINAL PAPERS ARE DEPOSITED WITH THE PTO WHICH CONTAIN NEW MATTER ARE NOT ACCORDED A FILING DATE BY BEING REFERRED TO IN THE DECLARATION. ACCORDINGLY, THE AMENDMENTS INVOLVED ARE THOSE FILED WITH THE APPLICATION PAPERS OR, IN THE CASE OF A SUPPLEMENTAL DECLARATION, ARE THOSE AMENDMENTS CLAIMING MATTER NOT ENCOMPASSED IN THE ORIGINAL STATEMENT OF INVENTION OR CLAIMS. SEE 37 CFR 1.67.

(c) ☐ was described and claimed in PCT International Application No. \_\_\_\_\_ filed on \_\_\_\_\_ and as amended under PCT Article 19 on \_\_\_\_\_ (IF ANY).

## ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information

☒ which is material to patentability as defined in 37, Code of Federal Regulations, § 1.56

☒ and which is material to the examination of this application, namely, information where there is a substantial likelihood that a reasonable examiner would consider it important in deciding whether to allow the application to issue as a patent, and

☐ In compliance with this duty there is attached an information disclosure statement in accordance with 37 § CFR 1.98.

### PRIORITY CLAIM (35 U.S.C. § 119)

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

COUNTRY (OR PCT)	APPLICATION NUMBER	FILING DATE (day, month, year)	PRIORITY CLAIMED UNDER 37 USC 119
US	60/033,491	20 December 1996	<input checked="" type="checkbox"/> YES NO <input type="checkbox"/>
US	60/096,269	12 August 1998	<input checked="" type="checkbox"/> YES NO <input type="checkbox"/>
			<input type="checkbox"/> YES NO <input type="checkbox"/>

### CLAIM FOR BENEFIT OF EARLIER U.S. APPLICATION(S) UNDER 35 U.S.C. § 120

I hereby claim benefit, under Title 35, United States Code, § 120, of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in 37 CFR § 1.56 that occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application.

This application is a continuation-in-part of the copending application(s) listed below, and I hereby claim priority for same under 35 U.S.C. § 120.

APPLICATION NUMBER	FILING DATE (day, month, year)	TITLE OF INVENTION
US 08/832,613	28 March 1997	Interactive Label for medication Containers and Dispensers
US 08/955,475	21 October 1997	System and Apparatus for Administering Prescribed Medication to a Patient

## POWER OF ATTORNEY

I hereby appoint Jeffrey S. Sokol; Reg. No. 35,686 to prosecute this application and transact all business in the Patent and Trademark Office in connection therewith.

SEND CORRESPONDENCE TO

DIRECT TELEPHONE CALLS TO:

Jeffrey S. Sokol  
Andrus, Scales, Starke & Sawall, LLP  
100 E. Wisconsin Avenue, Suite 1100  
Milwaukee, WI 53202

Jeffrey S. Sokol  
(414) 271-7590

## DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

## SIGNATURE

Full name of sole inventor

Carlos  
(GIVEN NAME) (MIDDLE INITIAL OR NAME)

de la Huerga  
FAMILY (OR LAST NAME)

Inventor's signature 

Date Oct. 23 2012

Country of Citizenship USA

Residence 9190 N. Upper River Road, River Hills, WI 53217

Post Office Address (same)

☒ This declaration ends with this page.